

Problem Definition

- Older patients with cancer frequently are under- or over-treated
 - Population is heterogeneous (comorbidity, functional status cognitive status, etc.)
 - **Chronological age is not a good predictor of treatment tolerability & efficacy**
 - Functional age is difficult to assess
- The SAOC at SKCC is multidisciplinary clinic providing **comprehensive geriatric assessments** for older patients with cancer
 - The goal is to assess functional age and make treatment recommendations to the referring oncologist.
 - Patients assessed by oncology, geriatrics, nutrition, social work, and pharmacy
 - More than 50 variables are collected across these domains
- The center has been active since 2013, and has **seen more than 500 patients**
 - Clinic population has not been characterized since 2014.
 - Data is stored in multiple databases, including Epic flowsheets
 - The data is inconsistently documented (often only in the notes)

Research Goals

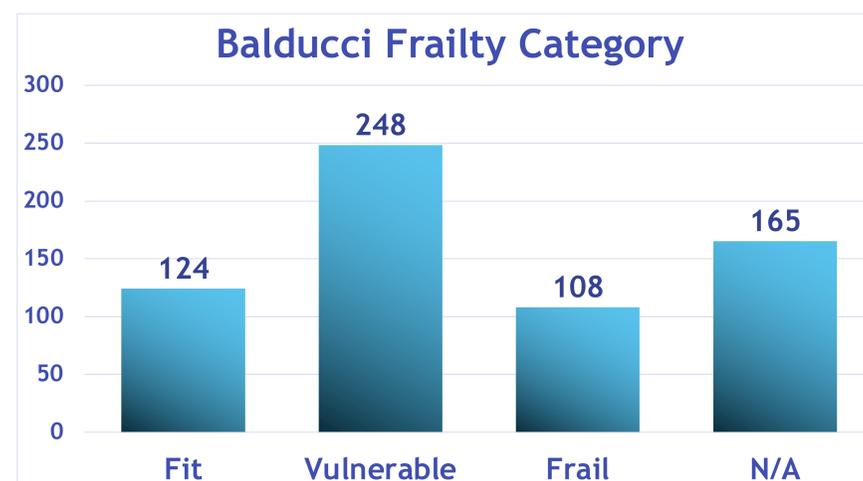
1. Describe the population seen in the SAOC over the past 6 years
2. Remediate and complete the EPIC flowsheets
3. Merge data with existing RedCAP data

Methods

- Developed a tool to export data from EPIC
 - Extensive work with Jeff's Epic department
 - Exported data with this tool
- Remediate data exported (validation, cleaning)
 - Many records were incomplete and required chart review (data kept in notes, not in flowsheet)
 - Ongoing process to correct EPIC flowsheets
- Exported and merged data from RedCAP
 - Calculated descriptive statistics for data fields collected

Results

- Over 150 records were missing data in the flowsheets with data present in the notes
- **Majority of patients over 8 years in the "Vulnerable" or "Frail" category.**
- 35% dependent on at least one IADL
- 28% dependent on at least one ADL



Results

465 patient's data evaluated from 2014 through the present:

- Mini-cog: 50.1% normal
- Timed Up-And-Go: 50% normal
- Polypharmacy: 48% normal
- Complementary & alternative medications: 25% Positive
- **Avg Life Expectancy: 10.5 yr**
- **Lee 4-year Mortality: 40%**
- Geriatric depression scale: 32% abnormal
- Distress thermometer: 3.6/10 average
- Has prescription coverage: 93%
- Mini nutritional assessment: 10.6 average
- Has financial need: 11%
- Has advanced directive: 51% No

Next Steps and Lessons Learned

- **Met Goal: described clinic patients**
- Improved quality of data collected significantly
- Produced tool to export data from EPIC for ongoing use
- **Next steps:**
 - Securing outcome data (mortality, treatment outcome, remission, quality of life)
 - Further description of these data: correlations and relationships between fields we report here